**eScription MDM Interface Requirements**

**Version 1.3**

**Prepared By: Tiffany Bohall**

**7/25/2019**

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# **Document Control**

## Resources

|  |  |  |
| --- | --- | --- |
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| Gustavo Borrego II | BayCare Director, IS Applications | [Gus.Borrego@baycare.org](mailto:Gus.Borrego@baycare.org) |
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| Tami Dillon (no longer with BC) | BayCare, SR Integration Analyst | N/A |
| Rick Quackenbush  (no longer with BC) | Vector Consulting | N/A |
|  |  |  |

## Project Distribution List

## Document Version Control

|  |  |  |  |
| --- | --- | --- | --- |
| **Version** | **Date** | **Modifier** | **Description** |
| V1.0 | 1/21/2016 | Tiffany Bohall | Originally Created |
| V1.1 | 11/9/17 | Lois Whitley | Cloverleaf site updated |
| V1.2 | 07/22/2019 | Tiffany Bohall | Cloverleaf section updated for changes related to going to MS# as sole provider number inbound |
| V1.3 | 07/25/19 | Sailaja Parimi | Cerner section updated for changes related to CHG0031162 |

# 1. Introduction

## 1.1 Purpose

The purpose of this document is to provide the intended audience with more information regarding the MDM transcription and dictation interface requirements originally built to support the HIM workflow in delivering transcribed reports to Cerner. This interface was rewritten in March 2012 when Soarian Financials and Scheduling were implemented and rolled out because Cerner’s contributor systems changed.

## 1.2 Project Scope

The scope of the integration for this specific document is only for the MDM configurations. The other interface component which goes through Cloverleaf is the ADT demographics that comes outbound from Soarian, is translated in Cloverleaf and then sent to Cerner. That document’s location can be found in section 1.5 of this document, titled Document References.

## 1.3 Terminology Standards

### 1.3.1 Acronyms

ADT: Admission Discharge Transfer -HL7 interface message type.

MDM: Documentation Message -HL7 interface message type.

### 1.3.2 Glossary –N/A

List the terms that require definition with respect to Cloverleaf and the product whose requirements are defined in this document. The definitions are specific to this document and may not be identical to the definitions of these terms in common use.

## 1.4 Document References

Since this documentation was created years after production implementation, there are only HL7 specifications available. These can be located on the **Enterprise Integration Services team Share Point site**: Applications and Systems > eScription > eScription HL7 Specs.

eScription\_ADT\_InterfaceRequirements:

**Enterprise Integration Services team Share Point site**: Applications and Systems > eScription > eScription\_ADT\_InterfaceRequirements.

# 2. Diagram –N/A

Provide a solution diagram that depicts the integration of components specified in this IDBB. This diagram must include the data flow for the interfaces (source and target).



# 3. Requirements

## 3.1 Functional Requirements

Provide detail for the below functional requirements. The message transformation requirements for the components defined in this specification should be specified in section 4.2 of this document.

|  |  |  |
| --- | --- | --- |
| **Cloverleaf** |  |  |
| **Number** | **Requirement Name** | **Requirement Description** |
| FR.2019.7.22 | Tags required in Cerner | The vendor is hard coding “BCCPI” in PID.3.4, “BCFN” in PID.18.4 and “BayCare Dr Number” in TXA 9.8 and TXA.10.8. |

## 3.2 Non-Functional Requirements

Provide concise detail for the below non-functional requirements. The below requirements must be evaluated for every project.

|  |  |  |
| --- | --- | --- |
| **Cloverleaf** |  |  |
| **Number** | **Requirement Name** | **Requirement Description** |
| NFR.2016.1.21 | ADT and ORM from IDX are sent to eScription | As a result of the need to implement a PowerScribe 360 downtime solution, the decision was made to send ADT and Radiology orders from GE IDX outbound to eScription. **This is down outside of the Cloverleaf interface engine** and has caused multiple issues over the years with facility data discrepancies. |
| NFR.2019.7.22 | Modify physician identifier for all facilities on transcription/dictations messages inbound. | The vendor had an issue storing the ‘MS’ prefix with the physician’s identifier when a project was under way to migrate from facility specific PR Doc number pools to enterprise MS# so there is additional logic in section 4.2 which elaborates on this need. |

## 3.3 Messaging Protocols

Below are listed the details for the messaging protocols that will be leveraged for this integration. Please see the reference document located on the Integration SharePoint server: <insert link to document here>

### 3.3.1 Inbound to BayCare’s Cloverleaf

Transcribed Reports:

* Port: 8064

Dictation Status:

* Port: 8063

### 3.3.2 Outbound from BayCare’s Cloverleaf -N/A

* Click here to enter text.

### 3.3.3 Inbound to the Vendor -N/A

* Click here to enter text.

### 3.3.4 Outbound from the Vendor -N/A

* Same as inbound to BayCare’s Cloverleaf above

### 3.3.5 Inbound to BayCare’s Cerner

**Test B30**

Port Number: 10012

IP Address: BAYCFLAPP6

**Test C30**

Port Number: 8001

IP Address: BAYCFLAPP5

**Test M30**

Port Number: 8007

IP Address: 159.140.43.200

**Prod**

Port Number: 8002

IP Address: 159.140.43.191

### 3.3.6 Outbound from BayCare’s Cerner -N/A

Click here to enter text.

IP Address: Click here to enter text.

# 4. HL7 Messaging

## 4.1 Messaging Format

HL7 2.3 cerner\_emr MDM\_T02

### 4.1.1 Segments

The segments utilized for this interface are:

MSH

PID

[ PV1 ]

[{ ZDS ]}

[{ OBX ]}

*Message Construction Notes:*

*[Square Brackets] – Optional*

*{Curly Brackets} – Repeatable*

*MSH – Message Header*

*EVN – Event segment*

*PID – Patient ID segment*

*PV1 – Patient Visit segment*

*ORC – Common Order segment*

*IN1 – Insurance segment*

*[{ – Start of optional, repeatable group*

*}] – End of optional, repeatable group*

### 4.1*.2* Messaging Event Types

Below are the messages types necessary for this integration

|  |  |
| --- | --- |
| **Event Type** | **Description** |
| MDM T02 | Original document notification and content |
|  |  |
|  |  |
|  |  |

### 4.1*.*3 Cloverleaf Configuration Files

Cloverleaf Configuration Files: escript\_cerner\_mdm\_soar.xlt

### 4.1.4 Cloverleaf Site Location

Cloverleaf site location: cerner\_results

## 4.2 Data Transformation Requirements

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Field Description** | **HL7 Field Loc.** | **Required Y/N** | **Data Type** | **Length** | **Notes** |
| All | All | Y | Varies | Varies | Bulk-copy entire message inbound |
| Attending Doctor ID | PV1.7.0 | Y |  |  | If PV1.7.0 does not = null, copy PV1.7.0 to PV1.7.0 and ensure the number value is 6 digits long. Take the output of PV1.7.0 and concatenate “MS” as a prefix outbound.  7/22/19 Cerner rules on the eScription contributor system updated to remove all facility specific coding from Cerner MO script. |
| Originator Code/Name ID | TXA.9.0 | Y |  |  | Copy TXA.9.0 with a TCL proc that pads left up to 6 digits long. Take the output of TXA.9.0 and concatenate “MS” as a prefix outbound with numeric identifier.  7/22/19 Cerner rules on the eScription contributor system updated to remove all facility specific coding from Cerner MO script. |
| Assigned Document Authenticator ID | TXA.10.0 | Y |  |  | Copy TXA.10.0 with a TCL proc that pads left up to 6 digits long. Take the output of TXA.9.0 and concatenate “MS” as a prefix outbound with numeric identifier.  7/22/19 Cerner rules on the eScription contributor system updated to remove all facility specific coding from Cerner MO script. |

## 4.3 Sample Message

**INBOUND from Nuance:**

MSH|^~\&|ESCRIPTION|BAYCARE|HNAM|BAYCARE|20190703164648||MDM^T02|9002883190703164648|P|2.3.1|

PID|1||810122837^^^^**BCCPI**||ESCRIPTION^TEST^^||19600615|M|||123 EScription Lane^^Palm Harbor^FL^34684|||||||6000144810^^^^**BCFN**||

PV1|1|I|||||007961^Shaw^Michael^C^^^^^BayCare Dr Number||||||||||||||||||||||||||||||||MPH|||||20190702133700||||||||

TXA|1|1^History and Physical|TX|20190703164101||20190703164101|20190703164644||007961^SHAW^MICHAEL^C^^^^^**BayCare Dr Number**|007961^SHAW^MICHAEL^C^^^^^BayCare Dr Number||9002883|||||TR

OBX|1|TX|1^History and Physical||ADMIT DATE: 07/02/2019~~Test~~Michael C Shaw, MD~~~~esc\_stan\_jennings / 000023~D: 07/03/2019 16:41:01 T: 07/03/2019 16:46:44 ~||||||TR|||20190703164101|

**OUTBOUND to Cerner:**

MSH|^~\&|ESCRIPTION|BAYCARE|HNAM|BAYCARE|20190703164648||MDM^T02|9002883190703164648|P|2.3.1

PID|1||810122837^^^^**BCCPI**||ESCRIPTION^TEST||19600615|M|||123 EScription Lane^^Palm Harbor^FL^34684|||||||6000144810^^^^**BCFN**

PV1|1|I|||||MS007961^Shaw^Michael^C^^^^^BayCare Dr Number||||||||||||||||||||||||||||||||MPH|||||20190702133700

TXA|1|1^History and Physical|TX|20190703164101||20190703164101|20190703164644||MS007961^SHAW^MICHAEL^C^^^^^**BayCare Dr Number**|MS007961^SHAW^MICHAEL^C^^^^^**BayCare Dr Number**||9002883|||||TR

OBX|1|TX|1^History and Physical||ADMIT DATE: 07/02/2019~~Test~~Michael C Shaw, MD~~~~esc\_stan\_jennings / 000023~D: 07/03/2019 16:41:01 T: 07/03/2019 16:46:44 ||||||TR|||20190703164101

# **5. Testing**

## 5.1. Unit Testing Scenarios –N/A

|  |  |
| --- | --- |
| **Scenario** | **Expected Result** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

## 5.2 Integrated Testing Scenarios -N/A

|  |  |
| --- | --- |
| **Scenario** | **Expected Result** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

## 5.3 Testing Approvals –N/A

|  |  |  |  |
| --- | --- | --- | --- |
| **Testing Phase** | **Date** | **Department** | **Team Member** |
| PH1.UNIT |  |  |  |
| PH1.INTEGRATED |  |  |  |

### 

## 5.4 Piloting –N/A

List the facilities and associated networks in scope for pilot testing.

## 5.5 Approvals

|  |  |  |  |
| --- | --- | --- | --- |
| **Testing Phase** | **Date** | **Department** | **Team Member** |
| PH1.0 |  |  |  |
|  |  |  |  |
|  |  |  |  |

# 6. Deployment / Implementation Model

Deployment was big bang, Enterprise wide initially. Then with the Soarian ADT roll out, deployment was a phased approach from June 2012 to Sept 2015.

## 6.1 Alerts

Are you going to need alerting on this connection?

|  |  |
| --- | --- |
| Yes |  |
| No |  |

If the answer is yes, please complete the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Site Name** | **Hours of Support** | **Distribution Group** | **Comments** |
|  |  |  |  |
|  |  |  |  |

# Appendix A: Risks and Concerns

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Name** |  |  | | |  |  |  |  |
| **Number** | **Risk / Concern** | **Comment** | **Mitigation** | | |  |  |  |
| RC.2016.1.21 | Data feeds from IDX | There have been numerous occasions where issues have come up as a result of taking ADT from the non-source of truth. IDX has different facility identifier acronyms than Soarian and Cerner. If a provider chooses an encounter based on IDX ADT and then sends a transcribed report over to Cerner with the IDX facility, there is a mismatch that occurs. | | There currently is no mitigation in place. | |  |  |  |

# Appendix B: Issues List

This is a dynamic list of the open issues related to the IDBB that remain to be solved, including but not limited to TBDs, pending decisions, information needed, conflict awaiting resolution, and the like.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Project Name** |  |  | | |  |  |  |  |
| **Number** | **Issue** | **Comment** | **Fix** | | |  |  |  |
| I.2013.1.0 |  |  | |  | |  |  |  |

* End of document